	TE/OFFICEHOLDER	FORM C/OH
CAMPAIG	N FINANCE REPORT	COVER SHEET PG 1
The C/OH INSTRUCTION this form.	N Guide explains how to complete (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	M3/MR3/MR FIRST MI	OFFICE USE ONLY
NAME	Mrs. Pamela N.	Date Received
	Pam Holm	ATT TO
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	5773 Woodway, PMB 293 Howton, TX 77057	pellofiand-delivered Date Postmarkto
5 CANDIDATE/	AREA CODE PHONE NUMBER EXTENSION	日 多次 四
OFFICEHOLDER PHONE	(713) 621-4328	Benefit #
6 CAMPAIGN TREASURER NAME	MS/MR FIRST MI MCS. PENNY. SUFFIX	Date line &
	Butter	
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (MOPO BOX PLEASE); APT/SUITE # CITY; STATE; 5773 Woodway, PMB 293, Howston	ZP CODE 1, TX 71057
8 CAMPAIGN TREASURER PHONE	AREA CUDE PHONE NUMBER EXTENSION (713) 621-4328	
9 REPORTTYPE	January 15 30th day before election Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 Sith day before election Exceeded \$500 limit	Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH 6/30	/o6
11 ELECTION	ELECTION DATE Month Day Year Primary Runoff	General Special
12 OFFICE	HOUSEN CITY COUNCIL DISK &	n) ´
14 NOTICE OF DIRECT CAMPAIGN	Direct campaign expenditures are campaign expenditures made by others without the can Candidates are required to disclose this information only if they receive notification of the direction of the directio	
EXPENDITURE BY OTHER INDIVIDUALS	Name :	
·	Address / PO Box; Apt. / Suite #; City: State: Zip Code	
additional pages		*
	GO TO PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET DG 2

SUFFORT	& IOIAL		COVER SHEET PG 2		
15 C/OH NAME P	am Holm		16 ACCOUNT #(Ethics Commission Nors)		
17 NOTICE FROM POLITICAL	may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to repo				
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC		1		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME			
,		COMMITTEE CAMPAIGN TREASURER ADDRESS			
,					
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$8,600.00		
EXPENDITURE TOTALS	3. TOTAL I	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZE	\$		
	4. TOTAL	POLITICAL EXPENDITURES	\$ 16,226.64		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA DRTING PERIOD	\$ 220, 428.39		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$		
19 AFFIDAVIT	ELLA M. SCHUBER MY COMMISSION EXP December 6, 2008	RES	formation required to be reported by		
AFFIX NOTARY STAMI		the said Pam Ham	, this the 12th day		
of Lly 2 Cla M Signature of officer ad	Schuber	tify which, witness my hand and seal of office. Printed name of officer administering oath Title	No lay whice of officer administering oath		

SCHEDULE A

The Instruction Guide explains how to complete this form.					Total pages this Schedule A: pg 1 of 2
FILER NAME	FILER NAME: Pam Holm				
Date 1-18-2006	Full name of contributor Reliant Energy PAC Contributor address;	out ot state PAC ID#		Amount of contribution (\$)	In-kind contribution description (if available)
Principal occupat	ion Vob title (See Instructions)	772	Employer (Se	e Instructions)	
Date 2-16-2006	Full name of contributor Randall Montalbano Contributor address;	out ot state PAC D#		Amount of contribution (\$)	In-kind contribution description (if available)
Principal occupat	on Uob title (See Instructions)		Employer (Se	e Instructions)	
Date 2-22-2006	Full name of contributor Winstead Sechrest & Contributor address:	out ot state PAC ID# Minick PAC City, state, zip code		Amount of contribution (\$) \$1,000.00	in-kind contribution description (if available)
Principal occupat	on Vob title (See Instructions)		Employer (See	e Instructions)	
Date 2-23-2006	Full name of contributor Houston Firefighters Contributor address;	out ot state PAC ID#PAC City, state, zip code		Amount of contribution (\$) \$2,000.00	In-kind contribution description (if available)
Principal occupati	on Vob title (See Instructions)	·	Employer (See	e Instructions)	<u> </u>
Date 2-23-2006	Full name of contributor Vinson & Elkins Texa Contributor address;	out ot state PAC ID# as PAC City, state, zip code		Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
upur vooupati	on the the termination		Employer (See	, madeditiona)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction	Total pages this Schedule A: pg 2 of 2			
FILER NAM	E: Pam Holm			ACCOUNT # (Ethics Commission filers)
Date 2-28-2006	Full name of contributor out ot state Full name of contributor out of	zip code	Amount of contribution (\$) \$500.00	In-kind contribution description (if available)
Principal occupa	ion Vob title (See Instructions)	Employe	er (See Instructions)	
Date 2-28-2006	Full name of contributor out of state in Andrews & Kurth Texas PAC Contributor address; City, state,	zip code	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal occupa	tion Vob title (See Instructions)	Employe	er (See Instructions)	
Date 3-1-2006	Full name of contributor out of state if Mike Garver Contributor address; City, state, if the contributor address is the contrib		Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal occupa Retired	ion Uob title (See Instructions)		er (See Instructions) Garver, Inc.	
Date 3-1-2006	Full name of contributor out of state Finding PAC Contributor address; City, state,	zip code	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if available)
Principal occupa	lion Vob title (See Instructions)	Employe	er (See Instructions)	

The Instruction Gui	ide explains how to complete this form.	[7	Total pages Schedule F:
		1 of 20	
FILER NAME: F	Pam Holm	A	ACCOUNT #: (Ethics Commission filer
Date 1/1/2006	Payee name Payee address Bed Bath & Beyond		Amount (\$) \$568.90
Purpose of expendit office supplies/	ture (See instructions regarding type of information required.) furniture	** Complete if di Candidate / Offi held	rect expenditure to benefit C/OH ** ceholder name Office sought /
Date 1/2/2006	Payee name Payee address Berings		Amount (\$) \$107.73
Purpose of expendit	ure (See instructions regarding type of information required.) S/equipment	** Complete if di Candidate / Offi held	rect expenditure to benefit C/OH ** ceholder name Office sought /
Date 1/2/2006	Payee name Payee address Melody Nelson		Amount (\$) \$300.00
	ure (See instructions regarding type of information required.) t for inaugural expenses	** Complete if di Candidate / Offi held	rect expenditure to benefit C/OH ** ceholder name Office sought /
Date 1/2/2006	Payee name Payee address Rice Epicurean		Amount (\$) \$458.06
Purpose of expendition	ure (See instructions regarding type of information required.)	** Complete if dis Candidate / Offic held	rect expenditure to benefit C/OH ** ceholder name Office sought /
Date 1/2/2006	Payee name Payee address River Oaks Plant House	•	Amount (\$) \$124.49
Purpose of expenditu	ure (See instructions regarding type of information required.)	** Complete if dir Candidate / Offic held	rect expenditure to benefit C/OH ** reholder name Office sought /

The Instruction Gu	ide explains how to complete this form.	To	otal pages Schedule F: 2 of 20
FILER NAME:	Pam Holm	AC	CCOUNT #: (Ethics Commission filers
Date 1/3/2006	Payee name Payee address Bank Restaurant 220 Main St Houston TX 77002		Amount (\$) \$784.34
Purpose of expendi District G inauç	ture (See instructions regarding type of information required.)	** Complete if dire Candidate / Office held	ext expenditure to benefit C/OH ** sholder name Office sought /
Date 1/9/2006	Payee name Payee address Jason's Deli 2711 Shepherd Square Houston TX 77098		Amount (\$) \$42.23
Purpose of expendi meeting exper	ture (See instructions regarding type of information required.)	** Complete if dire Candidate / Office held	ct expenditure to benefit C/OH ** eholder name Office sought /
Date 1/15/2006	Payee name Payee address SWB 2525 N. Loop W #5 Houston TX 77005		Amount (\$) \$24.95
Purpose of expendi- webhosting	ture (See instructions regarding type of information required.)	** Complete if dire Candidate / Office held	ct expenditure to benefit C/OH ** holder name Office sought /
Date 1/18/2006	Payee name Payee address La Griglia 2002 West Gray Houston TX 77019		Amount (\$) \$53.78
Purpose of expendit meeting expen	ture (See instructions regarding type of information required.)	** Complete if direction Candidate / Office held	ct expenditure to benefit C/OH ** holder name Office sought /
Date 1/19/2006	Payee name Payee address Artista 800 Bagby Houston TX 77002		Amount (\$) \$97.00
Purpose of expendit meeting expen	ure (See instructions regarding type of information required.)	** Complete if direction of the complete if d	ct expenditure to benefit C/OH ** holder name Office sought /

The Instruction Gu	ide explains how to complete this form.	Tot	al pages Schedule F:
FILER NAME: F	Pam Holm	ACC	COUNT #: (Ethics Commission fil
Date 1/19/2006	Payee name Payee address Verizon Wireless PO Box 105378 Atlanta GA 30348		Amount (\$) \$152.37
Purpose of expendicell phone serv	ture (See instructions regarding type of information required.) vice	** Complete if direct Candidate / Officeho	expenditure to benefit C/OH ** older name Office sought /
Date 1/21/2006	Payee name Payee address Rice Epicurean 5016 San Felipe Houston TX 77056		Amount (\$) \$39.00
Purpose of expenditure (See instructions regarding type of information required.) postage		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	
Date 1/23/2006	Payee name Payee address Bank Restaurant 220 Main St Houston TX 77002		Amount (\$) \$123.08
Purpose of expendit meeting expen	ture (See instructions regarding type of information required.) Ses	** Complete if direct Candidate / Officeho held	expenditure to benefit C/OH ** Ider name Office sought /
Date 1/24/2006	Payee name Payee address Arne's 2830 Hicks Houston TX 77007		Amount (\$) \$11.28
Purpose of expendit office supplies	ure (See instructions regarding type of information required.)	Complete if direct e Candidate / Officeho held	expenditure to benefit C/OH *** Ider name Office sought /
Date 1/24/2006	Payee name Payee address Go To My PC 5385 Hollister Santa Barbara CA 93111		Amount (\$) \$19.95
Purpose of expendit computer service	ure (See instructions regarding type of information required.)	** Complete if direct e Candidate / Officehol held	xpenditure to benefit C/OH ** der name Office sought /

The Instruction Guide explains how to complete this form. FILER NAME: Pam Holm		Total pages Schedule F: 4 of 20	
			ACCOUNT #: (Ethics Commission filers
Date 1/26/2006	Payee name Payee address Office Max 1576 West Gray Houston TX 770019		Amount (\$) \$98.04
Purpose of expendit	ure (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** fficeholder name Office sought /
Date 1/29/2006	Payee name Payee address CVS 1001 Waugh Houston TX 77019		Amount (\$) \$137.81
Purpose of expendit office supplies	ure (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** fficeholder name Office sought /
Date 1/29/2006	Payee name Payee address Office Depot 7519 Westheimer Houston TX 77057		Amount (\$) \$236.00
Purpose of expendit office furniture	ure (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** fficeholder name Office sought /
Date 2/1/2006	Payee name Payee address Houston Country Club One Potomac Houston TX 77057	•	Amount (\$) \$384.00
Purpose of expendit District G Holid	ure (See instructions regarding type of information required.) ay Luncheon		direct expenditure to benefit C/OH ** fficeholder name Office sought /
Date 2/2/2006	Payee name Payee address SWB 2525 N. Loop W #5 Houston TX 77005		Amount (\$) \$140.84
Purpose of expendit	ure (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** fficeholder name Office sought /

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought /
held

TODITICAL	EAT ENDIT UKES		SCHEDULE F
The Instruction G	uide explains how to complete this form.	Ťo	tal pages Schedule F: 5 of 20
FILER NAME: Pam Holm		AC	COUNT #: (Ethics Commission filers)
			•
Date	Payee name Payee address		Amount (\$)
2/2/2006	Tony's		\$98.00
	3755 Richmond		1
	Houston TX 77046		
Purpose of expend meeting expe	iture (See instructions regarding type of information required.) nses	** Complete if direct Candidate / Office held	et expenditure to benefit C/OH ** nolder name Office sought /
Date	Payee name Payee address		Amount (\$)
2/6/2006	Houston Livestock & Rodeo		\$50.00
	PO Box 20070		
	Houston TX 77225		
Purpose of expend	iture (See instructions regarding type of information required.)	** Complete if direc Candidate / Office held	tt expenditure to benefit C/OH ** holder name Office sought /
Date	Payee name Payee address		Amount (\$)
2/7/2006	Abbott Mailing		\$812.85
	707 W43rd Ste. 101		•
	Houston TX 77092		
	iture (See instructions regarding type of information required.) nailing expenses	** Complete if direc Candidate / Office held	et expenditure to benefit C/OH ** holder name Office sought /
Date	Payee name Payee address		Amount (\$)
2/7/2006	Houston Business Journal		\$87.00
2172000	1233 West Loop South		
	Houston TX 77027		
Purpose of expend subscription	liture (See instructions regarding type of information required.)	** Complete if direction of the complete in the	rt expenditure to benefit C/OH ** holder name Office sought /
Date	Payee name Payee address		Amount (\$)
2/7/2006	Samantha Mundinger		\$66.95
	13734 Kingsride		
	Houston TX 77079		

Purpose of expenditure (See instructions regarding type of information required.)

reimbursement for expenses

			Total pages Schedule F:	
The Instruction Guide explains how to complete this form.			6 of 20	
FILER NAME: F	Pam Holm	A	ACCOUNT #: (Ethics Commission files	
D.	Payer name Payer address		Amount (\$)	
Date 2/7/2006	Payee name Payee address Texas Monthly PO Box 1569 Austin TX78767		Amount (\$) \$20.00	
Purpose of expendi subscription	iture (See instructions regarding type of information required.)		tirect expenditure to benefit C/OH ** ficeholder name Office sought /	
Date 2/7/2006	Payee name Payee address Verizon Wireless PO Box 105378 Atlanta GA 30348		Amount (\$) \$432.99	
Purpose of expendicell phone equ	iture (See instructions regarding type of information required.) lipment		tirect expenditure to benefit C/OH ** ficeholder name Office sought /	
Date 2/9/2006	Payee name Payee address Kinko's 2200 SW Frywy Houston TX 77098		Amount (\$) \$48.18	
Purpose of expendi	iture (See instructions regarding type of information required.)	** Complete if d Candidate / Off held	direct expenditure to benefit C/OH ** ficeholder name Office sought /	
Date 2/14/2006	Payee name Payee address Central Market 3815 Westheimer		Amount (\$) \$94.95	

	Houston TX 77027		
Purpose of expend meeting expe	iture (See instructions regarding type of information required.)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held	
Date	Payee name Payee address	Amo \$50	ount (\$)

2/14/2006	League of Women Voters 2650 Fountainview Ste328 Houston TX 77057		\$50.00
Purpose of expenditure membership due	e (See instructions regarding type of information required.)	** Complete if direct ex Candidate / Officehold held	penditure to benefit C/OH ** der name Office sought /

The Instruction Guid	The Instruction Guide explains how to complete this form. Total p		
FILER NAME: Pa	FILER NAME: Pam Holm ACCOU		COUNT #: (Ethics Commission filers)
Date 2/15/2006	Payee name Payee address Fiesta Tacos 4620 W. 34th Houston TX 77092	•	Amount (\$) \$93.89
Purpose of expenditu	re (See instructions regarding type of information required.)	** Complete if direction candidate / Officeball	expenditure to benefit C/OH ** older name Office sought /
Date 2/15/2006	Payee name Payee address Verizon Wireless PO Box 105378 Atlanta GA 30348		Amount (\$) \$198.82
Purpose of expenditu cell phone servi	re (See instructions regarding type of information required.)	** Complete if direct Candidate / Officeh held	expenditure to benefit C/OH ** older name Office sought /
Date 2/15/2006	Payee name Payee address SWB 2525 N. Loop W #5 Houston TX 77005		Amount (\$) \$24.95
Purpose of expenditu	re (See instructions regarding type of information required.)	** Complete if direction of the complete if direction candidate / Officehold	expenditure to benefit C/OH ** older name Office sought /
Date 2/22/2006	Payee name Payee address Artista 800 Bagby Houston TX 77002		Amount (\$) \$110.01
Purpose of expenditure Staff appreciation	re (See instructions regarding type of information required.) In luncheon	** Complete if direct Candidate / Officeh held	expenditure to benefit C/OH ** older name Office sought /
Date 2/23/2006	Payee name Payee address Post Net 5773 Woodway Houston TX 77057		Amount (\$) \$140.00
Purpose of expenditu	re (See instructions regarding type of information required.)	** Complete if direct Candidate / Officeh held	expenditure to benefit C/OH ** older name Office sought /

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 8 of 20	
FILER NAME: Pam Holm		* ,	ACCOUNT #: (Ethics Commission filers
Date 2/24/2006	Payee name Payee address Go To My PC 5385 Hollister Santa Barbara CA 93111		Amount (\$) \$19.95
Purpose of expendito	ure (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ficeholder name Office sought /
Date 3/4/2006	Payee name Payee address Circuit City 4500 San Felipe Houston TX 77027		Amount (\$) \$44.36
Purpose of expendition office supplies	ure (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ficeholder name Office sought /
Date 3/5/2006	Payee name Payee address Jewish Herald Voice 3403 Audley Houston TX 77098		Amount (\$) \$407.50
Purpose of expendite Advertisement	ure (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ficeholder name Office sought /
Date 3/14/2006	Payee name Payee address Angela Young 1115 Avenue H Galveston TX 77550		Amount (\$) \$147.27
Purpose of expenditorse	ure (See instructions regarding type of information required.)	** Complete if of Candidate / Of held	direct expenditure to benefit C/OH ** ficeholder name Office sought /
Date 3/14/2006	Payee name Payee address Houston Chronicle 801 Texas Houston TX 77002		Amount (\$) \$186.00
Purpose of expenditor	ure (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ficeholder name Office sought /

The Instruction Gui	de explains how to complete this form.	Total	pages Schedule F: 9 of 20
FILER NAME: P	am Holm	ACCC	OUNT #: (Ethics Commission filers)
	}		
Date 3/15/2006	Payee name Payee address SWB 2525 N. Loop W #5 Houston TX 77005		Amount (\$) \$24.95
Purpose of expendito webhosting	ure (See instructions regarding type of information required.)	** Complete if direct ex Candidate / Officehold held	penditure to benefit C/OH ** ler name Office sought /
Date 3/16/2006	Payee name Payee address Magic Circle c/o 5995 Woodway Houston, TX 77057	: -	Amount (\$) \$17.00
Purpose of expendite membership du	ure (See instructions regarding type of information required.)	** Complete if direct ex Candidate / Officehold held	penditure to benefit C/OH ** ler name Office sought /
Date 3/18/2006	Payee name Payee address Verizon Wireless PO Box 105378 Atlanta GA 30348		Amount (\$) \$297.08
Purpose of expenditu	ure (See instructions regarding type of information required.)	** Complete if direct ex Candidate / Officehold held	penditure to benefit C/OH ** der name Office sought /
Date 3/24/2006	Payee name Payee address Go To My PC 5385 Hollister Santa Barbara CA 93111		Amount (\$) \$19.95
Purpose of expenditu	ure (See instructions regarding type of information required.)	** Complete if direct ex Candidate / Officehold held	penditure to benefit C/OH ** ler name Office sought /
Date 3/26/2006	Payee name Payee address Target 4323 San Felipe Houston, TX 77027		Amount (\$) \$235.97
Purpose of expenditu	ure (See instructions regarding type of information required.)	** Complete if direct ex Candidate / Officehold held	penditure to benefit C/OH ** ler name Office sought /

The Instruction Guide explains how to complete this form.			Total page	s Schedule F: 10 of 20
FILER NAME: F	FILER NAME: Pam Holm		ACCOUNT :	#: (Ethics Commission filers
Date 3/28/2006	Payee name Payee address Dr. Marnie Rose Foundation 5090 Richmond PMB 291 Houston Tx 77056			Amount (\$) \$100.00
Purpose of expendi donation	ture (See instructions regarding type of information required.)		direct expenditur ifficeholder name	e to benefit C/OH ** Office sought /
Date 3/28/2006	Payee name Payee address Memorial Women Republican Women 1429 Spring Rock Houston TX 77055			Amount (\$) \$15.00
Purpose of expendi membership de	ture (See instructions regarding type of information required.)		direct expenditur ifficeholder name	e to benefit C/OH ** Office sought /
Date 3/28/2006	Payee name Payee address Magic Circle c/o 5995 Woodway Houston, TX 77057			Amount (\$) \$100.00
Purpose of expendi Advertisement	ture (See instructions regarding type of information required.) in program		direct expenditur fficeholder name	e to benefit C/OH ** Office sought /
Date 3/28/2006	Payee name Payee address USPS c/o 2299 White St Houston, TX 77007	· ,		Amount (\$) \$17.99
Purpose of expendi postage	ture (See instructions regarding type of information required.)		direct expenditur fficeholder name	e to benefit C/OH ** Office sought /
Date 3/30/2006	Payee name Payee address Office Max 1576 West Gray Houston Tx 77019			Amount (\$) \$330.23
Purpose of expendi	ture (See instructions regarding type of information required.) nt/supplies		direct expenditur fficeholder name	e to benefit C/OH ** Office sought /

The Instruction Guide explains how to complete this form.		Total pages Schedule F: 11 of 20	
FILER NAME: Pam, Holm		ACCOUNT #: (Ethics Commission filer	
Date 3/31/2006	Payee name Payee address Gov. Perry Campaign PO Box 2013 Austin TX78768	 Amount (\$) \$500.00	
Purpose of expendition	ture (See instructions regarding type of information required.)	direct expenditure to benefit C/OH ** fficeholder name Office sought /	
Date 4/5/2006	Payee name Payee address Jason's Deli 2711 Shepherd Square Houston TX 77098	Amount (\$) \$24.90	
Purpose of expendition meeting expen	ture (See instructions regarding type of information required.)	direct expenditure to benefit C/OH ** fficeholder name Office sought /	
Date 4/10/2006	Payee name Payee address Martha Wong Campaign 3015 Richmond,STE 190 Houston TX 77098	Amount (\$) \$250.00	
Purpose of expendit	ture (See instructions regarding type of information required.)	direct expenditure to benefit C/OH ** fficeholder name Office sought /	
Date 4/11/2006	Payee name Payee address Artista 800 Bagby Houston TX 77002	Amount (\$) \$24.73	
Purpose of expendit meeting expen	ture (See instructions regarding type of information required.)	direct expenditure to benefit C/OH ** fficeholder name Office sought /	
Date 4/11/2006	Payee name Payee address Houston Jaycees PO Box 61568 Houston TX 77208	Amount (\$) \$250.00	
Purpose of expendit	rure (See instructions regarding type of information required.)	direct expenditure to benefit C/OH ** fficeholder name Office sought /	

The Instruction Guide explains how to complete this form. FILER NAME: Pam Holm		T	otal pages Schedule F: 12 of 20
		A	CCOUNT #: (Ethics Commission file
Date 4/11/2006	Payee name Payee address John Culberson Campaign PO Box 41964 Houston TX 77241		Amount (\$) \$250.00
Purpose of expendi contribution	ture (See instructions regarding type of information required.)	** Complete if dir Candidate / Office held	rect expenditure to benefit C/OH ** reholder name Office sought /
Date 4/11/2006	Payee name Payee address River Oaks Plant House 3401 Westheimer Houston TX 77027		Amount (\$) \$80.11
Purpose of expendi flowers for con	ture (See instructions regarding type of information required.) Stituent	** Complete if dir Candidate / Offic held	rect expenditure to benefit C/OH ** reholder name Office sought /
Date 4/15/2006	Payee name Payee address CVS 1001 Waugh Houston TX 77019		Amount (\$) \$97.20
Purpose of expendi office supplies	ture (See instructions regarding type of information required.)	** Complete if dir Candidate / Office held	ect expenditure to benefit C/OH ** ceholder name Office sought /
Date 4/15/2006	Payee name Payee address SWB 2525 N. Loop W #5 Houston TX 77005		Amount (\$) \$24.95
Purpose of expendi webhosting	ture (See instructions regarding type of information required.)	** Complete if dir Candidate / Office held	ect expenditure to benefit C/OH ** eholder name Office sought /
Date 4/18/2006	Payee name Payee address Verizon Wireless PO Box 105378 Atlanta GA 30348		Amount (\$) \$204.90
Purpose of expendi	ture (See instructions regarding type of information required.) /iCe	** Complete if din Candidate / Offic held	ect expenditure to benefit C/OH ** eholder name Office sought /

The Instruction Gu	ide explains how to complete this form.	Tot	al pages Schedule F: 13 of 20
FILER NAME: Pam Holm		ACC	COUNT #: (Ethics Commission file
Date 4/19/2006	Payee name Payee address Office Max 1576 West Gray Houston TX 77019		Amount (\$) \$67.09
Purpose of expendit office supplies	ture (See instructions regarding type of information required.)	** Complete if direct Candidate / Officeh held	expenditure to benefit C/OH ** older name Office sought /
Date 4/24/2006	Payee name Payee address CVS 1001 Waugh Houston TX 77019		Amount (\$) \$5.49
Purpose of expendit office supplies	ture (See instructions regarding type of information required.)	** Complete if direct Candidate / Officeh held	expenditure to benefit C/OH ** older name Office sought /
Date 4/24/2006	Payee name Payee address Go To My PC 5385 Hollister Santa Barbara CA 93111	:	Amount (\$) \$19.95
Purpose of expendit	ture (See instructions regarding type of information required.)	** Complete if direct Candidate / Officeh held	expenditure to benefit C/OH ** older name Office sought /
Date 4/27/2006	Payee name Payee address Daughters of Liberty 10670 Northbrook Houston TX 77043		Amount (\$) \$120.00
	ture (See instructions regarding type of information required.) and membership dues	** Complete if direct Candidate / Officeh held	expenditure to benefit C/OH ** older name Office sought /
Date 4/28/2006	Payee name Payee address River Oaks Plant House 3401 Westheimer Houston TX 77027		Amount (\$) \$29.17
Purpose of expendit	ture (See instructions regarding type of information required.)	** Complete if direct Candidate / Officeh held	expenditure to benefit C/OH ** older name Office sought /

	<u> </u>		
The Instruction Guid	The Instruction Guide explains how to complete this form.		Total pages Schedule F: 14 of 20
FILER NAME: P	am Holm	ŀ	ACCOUNT #: (Ethics Commission filers)
Date 4/30/2006	Payee name Payee address St. Luke's UMC 3740 Westheimer Houston TX 77027		Amount (\$) \$650.00
Purpose of expenditu	re (See instructions regarding type of information required.) eting space		direct expenditure to benefit C/OH ** ficeholder name Office sought /
Date 5/2/2006	Payee name Payee address Gentral Print 900 Bagby Houston TX 77002		Amount (\$) \$5.28
Purpose of expenditu	re (See instructions regarding type of information required.)		tirect expenditure to benefit C/OH ** ficeholder name Office sought /
Date 5/3/2006	Payee name Payee address Artista 800 Bagby Houston TX 77002		Amount (\$) \$129.26
Purpose of expenditu Staff appreciation	re (See instructions regarding type of information required.) on luncheon	** Complete if d Candidate / Off held	firect expenditure to benefit C/OH ** ficeholder name Office sought /
Date 5/5/2006	Payee name Payee address USPS c/o 2299 White St Houston TX 77007		Amount (\$) \$122.10
Purpose of expenditu	re (See instructions regarding type of information required.)		lirect expenditure to benefit C/OH ** ficeholder name Office sought /
Date 5/8/2006	Payee name Payee address Central Print 800 Bagby Houston TX 77002		Amount (\$) \$6.04
Purpose of expenditu	re (See instructions regarding type of information required.)		lirect expenditure to benefit C/OH ** ficeholder name Office sought /

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The Instruction Guid	The Instruction Guide explains how to complete this form. Total p		
FILER NAME: Pam Holm ACCO		COUNT #: (Ethics Commission filers)	
		· · · · · · · · · · · · · · · · · · ·	
Date 5/9/2006	Payee name Payee address Central Market 3815 Westheimer Houston TX 77098		Amount (\$) \$286.93
Purpose of expenditure meeting expens	re (See instructions regarding type of information required.)	** Complete if direc Candidate / Officel held	t expenditure to benefit C/OH ** tolder name Office sought /
Date 5/13/2006	Payee name Payee address Hershey's Times Square 1593 Broadway New York, NY 10019		Amount (\$) \$22.11
Purpose of expenditue gift for constituer	re (See instructions regarding type of information required.)	** Complete if direc Candidate / Officei held	t expenditure to benefit C/OH ** tolder name Office sought /
Date 5/14/2006	Payee name Payee address Newark Int'l Airport Newark NJ Newark, NJ		Amount (\$) \$14.06
Purpose of expenditure	re (See instructions regarding type of information required.).	** Complete if direc Candidate / Officel held	t expenditure to benefit C/OH ** colder name Office sought /
Date 5/15/2006	Payee name Payee address SWB 2525 N. Loop W #5 Houston TX 77005		Amount (\$) \$24.95
Purpose of expenditure webhosting	re (See instructions regarding type of information required.)	** Complete if direct Candidate / Officel held	t expenditure to benefit C/OH ** older name Office sought /
Date 5/18/2006	Payce name Payce address Verizon Wireless PO Box 105378 Atlanta GA 30348		Amount (\$) \$260.60
Purpose of expenditur	re (See instructions regarding type of information required.)	** Complete if direct Candidate / Officely held	t expenditure to benefit C/OH ** colder name Office sought /

The Instruction Guid	The Instruction Guide explains how to complete this form. Total 1		
FILER NAME: P	FILER NAME: Pam Holm ACCO		
Date 5/21/2006	Payee name Payee address Continental Airlines 600 Jefferson Houston TX 77002		Amount (\$) \$613.10
1	ure (See instructions regarding type of information required.) and for city business	** Complete if direct e Candidate / Officeho held	expenditure to benefit C/OH ** der name Office sought /
Date 5/22/2006	Payee name Payee address Tony Morris 900 Bagby Houston TX 77002		Amount (\$) \$60.00
Purpose of expenditum photographs	re (See instructions regarding type of information required.)	** Complete if direct of Candidate / Officeho held	expenditure to benefit C/OH ** dder name Office sought /
Date 5/24/2006	Payee name Payee address Go To My PC 5385 Hollister Santa Barbara CA 93111		Amount (\$) \$19.95
Purpose of expenditu	ure (See instructions regarding type of information required.)	** Complete if direct e Candidate / Officeho held	expenditure to benefit C/OH ** der name Office sought /
Date 5/29/2006	Payee name Payee address Rice Epicurean 5016 San Felipe Houston TX 77056		Amount (\$) \$39.00
Purpose of expenditu postage	re (See instructions regarding type of information required.)	** Complete if direct e Candidate / Officehol held	xpenditure to benefit C/OH ** der name Office sought /
Date 5/29/2006	Payee name Payee address SWB 2525 N. Loop W #5 Houston TX 77005	·	Amount (\$) \$141.18
Purpose of expenditu	IL : Ire (See instructions regarding type of information required.) CO	** Complete if direct of Candidate / Officehol held	xpenditure to benefit C/OH ** der name Office sought /

The Instruction Guide explains how to complete this form.			Total pages Schedule F: 17 of 20
FILER NAME: Pam Holm		•	ACCOUNT #: (Ethics Commission file
Date 6/3/2006	Payee name Payee address Home Depot 5445 West Loop South Houston TX 77081		Amount (\$) \$171.83
Purpose of expendit office equipme	ture (See instructions regarding type of information required.) nt/supplies		f direct expenditure to benefit C/OH ** Officeholder name Office sought /
Date 6/13/2006	Payee name Payee address Central Market 3815 Westheimer Houston TX 77027		Amount (\$) \$14.85
Purpose of expenditure (See instructions regarding type of information required.) Council breakfast			f direct expenditure to benefit C/OH ** Office holder name Office sought /
Date 6/13/2006	Payee name Payee address Rice Epicurean 5016 San Felipe Houston TX 77056		Amount (\$) \$19.71
Purpose of expendit	ture (See instructions regarding type of information required.)		f direct expenditure to benefit C/OH ** Officeholder name Office sought /
Date 6/14/2006	Payee name Payee address Fiesta Tacos 4629 W. 34th St Houston TX 77092		Amount (\$) \$108.33
Purpose of expendit council breakfa	cure (See instructions regarding type of information required.)	** Complete if Candidate / C held	direct expenditure to benefit C/OH ** Officeholder name Office sought /
Date 6/14/2006	Payce name Payce address La Griglia 2002 West Gray Houston TX 77019		Amount (\$) \$43.41
Purpose of expendit	ure (See instructions regarding type of information required.) SeS		direct expenditure to benefit C/OH ** officeholder name Office sought /

The Instruction Guide explains how to complete this form.			Total pages Schedule F: 18 of 20	
FILER NAME: Pam Holm			ACCOUNT #: (Ethics Commission filer	
Date 6/14/2006	Payce name Payce address Office Max 1576 West Gray Houston TX 77019		Amount (\$) \$114.21	
Purpose of expendi office supplies	ture (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ficeholder name Office sought /	
Date 6/15/2006	Payee name Payee address SWB 2525 N. Loop W #5 Houston TX 77005		Amount (\$) \$24.95	
Purpose of expendi webhosting	ture (See instructions regarding type of information required.)		direct expenditure to benefit C/OH ** ficeholder name Office sought /	
Date 6/16/2006	Payee name Payee address Dan Starr 8585 Woodway Houston TX 77063		Amount (\$) \$754.00	
Purpose of expendi contract emplo	ture (See instructions regarding type of information required.) yment		direct expenditure to benefit C/OH ** ficeholder name Office sought /	
Date 6/18/2006	Payee name Payee address Verizon Wireless PO Box 105378 Atlanta GA 30348		Amount (\$) \$204.98	
Purpose of expendi cell phone serv	ture (See instructions regarding type of information required.)	** Complete if d Candidate / Off held	direct expenditure to benefit C/OH ** ficeholder name Office sought /	
Date 6/24/2006	Payee name Payee address Go To My PC 5385 Hollister Santa Barbara CA 93111		Amount (\$) \$19.95	
Purpose of expendi	ture (See instructions regarding type of information required.)		irect expenditure to benefit C/OH ** ficeholder name Office sought /	

The Instruction Guide explains how to complete this form.			Total pages Schedule F:	
FILER NAME: Pam Holm		A	ACCOUNT #: (Ethics Commission fi	
Date 6/26/2006	Payee name Payee address Dan Starr 8585 Woodway Houston TX 77063		Amount (\$) \$780.00	
Purpose of expenditure (See instructions regarding type of information required.) contract employment		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		
Date 6/26/2006	Payee name Payee address HEB 2660 Fountainview Houston TX 77057		Amount (\$) \$37.24	
Purpose of expenditure (See instructions regarding type of information required.) meeting expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		
Date 6/26/2006	Payee name Payee address Target 4323 San Felipe Houston TX 77027		Amount (\$) \$250.48	
Purpose of expenditure (See instructions regarding type of information required.) Office equipment/supplies		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		
Date 6/27/2006	Payee name Payee address Central Print 800 Bagby Houston TX 77002		Amount (\$) \$13.51	
Purpose of expenditure (See instructions regarding type of information required.) printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		
Date 6/27/2006	Payee name Payee address Office Max 1576 West Gray Houston TX 77019		Amount (\$) \$49.77	
Purpose of expenditure (See instructions regarding type of information required.) printing		** Complete if dir Candidate / Offic held	ect expenditure to benefit C/OH ** eholder name Office sought /	

The Instruction Guide explains how to complete this form.		Tota	Total pages Schedule F: 20 of 20	
FILER NAME: Pam Holm			ACCOUNT #: (Ethics Commission filers)	
Date 6/27/2006	Payee name Payee address Randall's 14610 Memorial Houston TX 77079		Amount (\$) \$16.82	
Purpose of expenditure (See instructions regarding type of information required.) Supplies		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		
Date 6/27/2006	Payee name Payee address Starbuck's 14607 Memorial Houston TX 77079		Amount (\$) \$15.09	
Purpose of expenditure (See instructions regarding type of information required.) meeting expenses		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		
Date 6/28/2006	Payee name Payee address Angela Young 1115 Avenue H Galveston TX 77550	-	Amount (\$) \$972.00	
Purpose of expenditure (See instructions regarding type of information required.) compensation		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		
Date 6/28/2006	Payee name Payee address Barnes & Noble 12850 Memorial Houston TX 77024		Amount (\$) \$64.79	
Purpose of expenditure (See instructions regarding type of information required.) office supplies		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		
Date 6/28/2006	Payee name Payee address Walgreen's 3900 Westheimer Houston TX 77027		Amount (\$) \$11.98	
Purpose of expenditure (See instructions regarding type of information required.) office supplies		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held		